

# CHANDAN DIAGNOSTIC CENTRE

Name of Company: Mediwheel (PORS)

Name of Executive: Dr. H. Chaudhary

Date of Birth: 01.05.1997

Sex:  Male /  Female

Height: 1.58 CMs

Weight: 58 KGs

BMI (Body Mass Index): 23.2

Chest (Expiration / Inspiration) 90/92 CMs

Abdomen: 82 CMs

Blood Pressure: 120/80 mm/Hg

Pulse: 76 BPM - Regular / Irregular

RR: 18 Resp/Min

Ident Mark: - cat mark on forehead.

Any Allergies: - No

Vertigo: - No

Any Medications: - No

Any Surgical History: - No

Habits of alcoholism/smoking/tobacco: - No

Chief Complaints if any: - No

Lab Investigation Reports: - No

Eye Check up vision & Color vision: - Normal

Left eye: - Normal

Right eye: - Normal

Near vision: - Normal

Far vision: - Normal

Dental check up: - Normal

# CHANDAN DIAGNOSTIC CENTRE

ENT Check up : - *Normal*

Eye Checkup: - *Normal*

### Final impression

Certified that I examined *Dr. H. Chauhan* S/o or D/o .....  
is presently in good health and free from any cardio-respiratory/communicable  
ailment, he/she is *fit/Unfit* to join any organization.

*Rohit*  
Client Signature :-

.....  
Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS,MD)

Date...*02.10.2022* Place - VARANASIS

*Dr. R.C. ROY*  
MBBS.,MD. (Radio Diagnosis)  
Reg. No.-265913

Chandan Diagnostic Center  
39, Shivaji Nagar, Mahmooorganj  
Varanasi-221010 (U.P.)  
Phone No.:0542-2223232

# Chandan Diagnostic

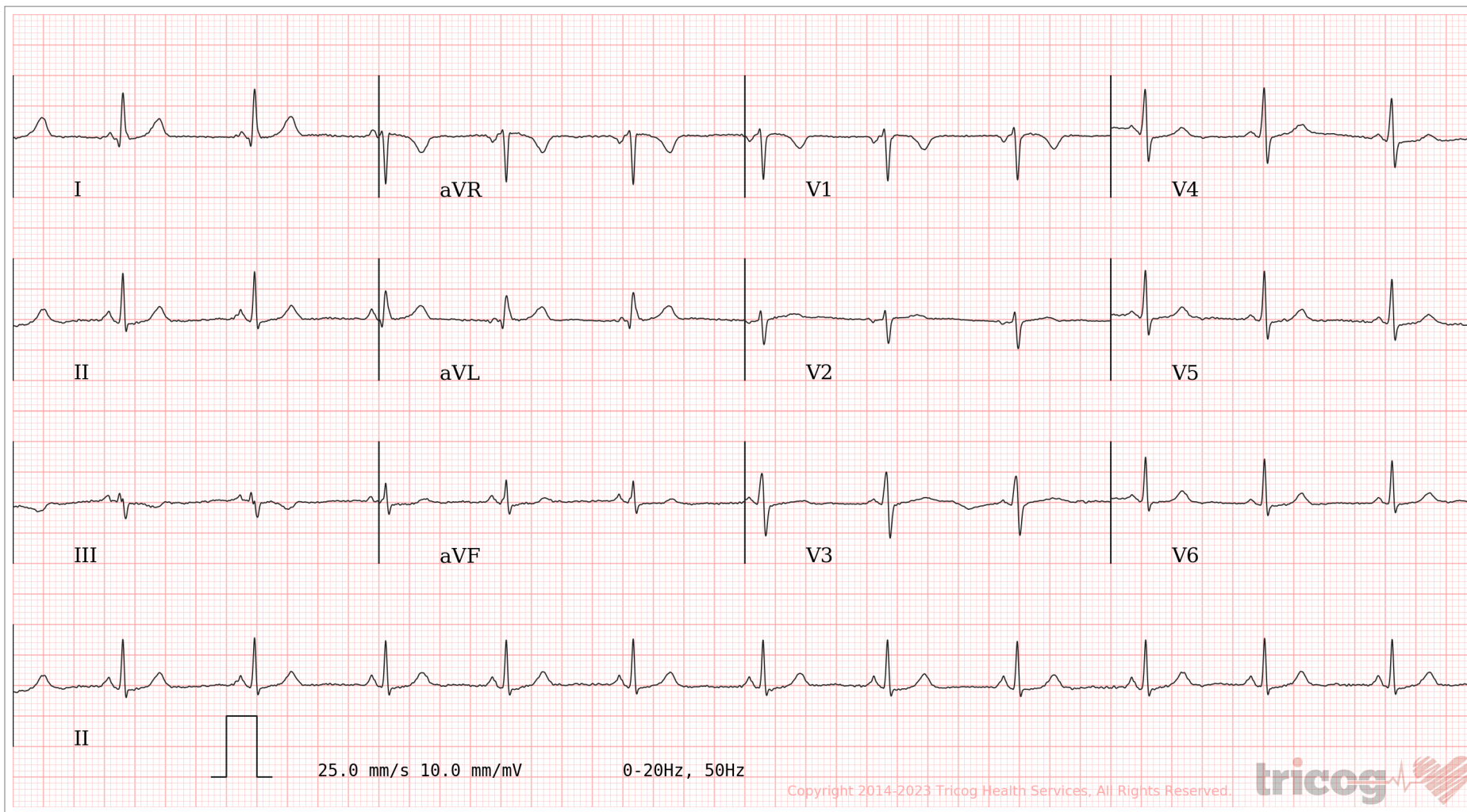
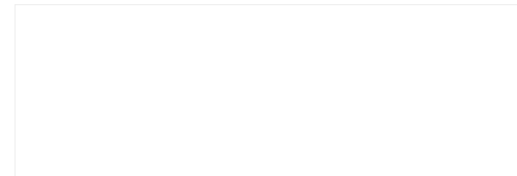


Age / Gender: 25/Female

Date and Time: 8th Jan 23 2:28 PM

Patient ID: CVAR0075512223

Patient Name: Mrs.PRITI CHAUBEY-PKG10000239



AR: 72bpm    VR: 72bpm    QRSD: 76ms    QT: 356ms    QTc: 389ms    PRI: 102ms    P-R-T: 53° 23° 3°

Sinus Rhythm, Short PR Interval. Please correlate clinically.

AUTHORIZED BY

Dr. Charit  
MD, DM: Cardiology

REPORTED BY

Dr. Serrao Janice George

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

63382



भारत सरकार

Government of India



Issue Date: 24/05/2016



प्रीति चौबे

Priti Chaubey

जन्म तिथि / DOB : 01/05/1997

महिला / Female



3185 4385 1238

3185 4385 1238

मेरा आधार, मेरी पहचान



# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-3500227  
CIN : U85110DL2003PLC308206



|              |  |               |                        |
|--------------|--|---------------|------------------------|
| Patient Name | : Mrs.PRITI CHAUBEY-PKG10000239            | Registered On | : 08/Jan/2023 13:46:30 |
| Age/Gender   | : 25 Y 0 M 0 D /F                          | Collected     | : 08/Jan/2023 14:25:06 |
| UHID/MR NO   | : CVAR.0000034695                          | Received      | : 08/Jan/2023 14:26:22 |
| Visit ID     | : CVAR0075512223                           | Reported      | : 08/Jan/2023 15:27:55 |
| Ref Doctor   | : Dr.Mediwheel - Arcofemi Health Care Ltd. | Status        | : Final Report         |

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

#### Blood Group (ABO & Rh typing) \* , Blood

|              |          |
|--------------|----------|
| Blood Group  | B        |
| Rh ( Anti-D) | POSITIVE |

#### Complete Blood Count (CBC) \* , Whole Blood

|                                   |       |                |  |                                  |
|-----------------------------------|-------|----------------|--|----------------------------------|
| Haemoglobin                       | 11.70 | g/dl           | 1 Day- 14.5-22.5 g/dl<br>1 Wk- 13.5-19.5 g/dl<br>1 Mo- 10.0-18.0 g/dl<br>3-6 Mo- 9.5-13.5 g/dl<br>0.5-2 Yr- 10.5-13.5 g/dl<br>2-6 Yr- 11.5-15.5 g/dl<br>6-12 Yr- 11.5-15.5 g/dl<br>12-18 Yr 13.0-16.0 g/dl<br>Male- 13.5-17.5 g/dl<br>Female- 12.0-15.5 g/dl |                                  |
| TLC (WBC)                         | 6,900 | /Cu mm         | 4000-10000   | ELECTRONIC IMPEDANCE             |
| <u>DLC</u>                        |       |                |  |                                  |
| Polymorphs (Neutrophils)          | 65.00 | %              | 55-70  | ELECTRONIC IMPEDANCE             |
| Lymphocytes                       | 30.00 | %              | 25-40  | ELECTRONIC IMPEDANCE             |
| Monocytes                         | 2.00  | %              | 3-5  | ELECTRONIC IMPEDANCE             |
| Eosinophils                       | 3.00  | %              | 1-6  | ELECTRONIC IMPEDANCE             |
| Basophils                         | 0.00  | %              | <1   | ELECTRONIC IMPEDANCE             |
| <u>ESR</u>                        |       |                |  |                                  |
| Observed                          | 20.00 | Mm for 1st hr. |  |                                  |
| Corrected                         | 10.00 | Mm for 1st hr. | < 20   |                                  |
| PCV (HCT)                         | 37.10 | %              | 40-54  |                                  |
| Platelet count                    |       |                |  |                                  |
| Platelet Count                    | 2.11  | LACS/cu mm     | 1.5-4.0  | ELECTRONIC IMPEDANCE/MICROSCOPIC |
| PDW (Platelet Distribution width) | nr    | fL             | 9-17   | ELECTRONIC IMPEDANCE             |
| P-LCR (Platelet Large Cell Ratio) | nr    | %              | 35-60  | ELECTRONIC IMPEDANCE             |
| PCT (Platelet Hematocrit)         | nr    | %              | 0.108-0.282  | ELECTRONIC IMPEDANCE             |
| MPV (Mean Platelet Volume)        | nr    | fL             | 6.5-12.0   | ELECTRONIC IMPEDANCE             |
| <u>RBCCount</u>                   |       |                |  |                                  |
| RBC Count                         | 4.15  | Mill./cu mm    | 3.7-5.0  | ELECTRONIC IMPEDANCE             |





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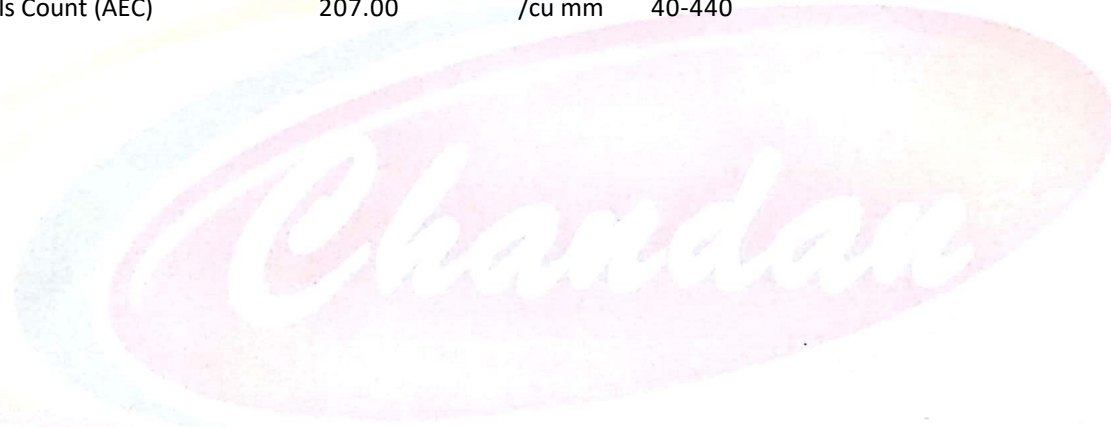


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## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name                        | Result   | Unit   | Bio. Ref. Interval | Method               |
|----------------------------------|----------|--------|--------------------|----------------------|
| Blood Indices (MCV, MCH, MCHC)   |          |        |                    |                      |
| MCV                              | 89.30    | fl     | 80-100             | CALCULATED PARAMETER |
| MCH                              | 28.10    | pg     | 28-35              | CALCULATED PARAMETER |
| MCHC                             | 31.40    | %      | 30-38              | CALCULATED PARAMETER |
| RDW-CV                           | 14.90    | %      | 11-16              | ELECTRONIC IMPEDANCE |
| RDW-SD                           | 49.00    | fL     | 35-60              | ELECTRONIC IMPEDANCE |
| Absolute Neutrophils Count       | 4,485.00 | /cu mm | 3000-7000          |                      |
| Absolute Eosinophils Count (AEC) | 207.00   | /cu mm | 40-440             |                      |



S.N. Sinha

Dr.S.N. Sinha (MD Path)





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| Visit ID     | : CVAR0075512223                           | Reported      | : 08/Jan/2023 15:41:44 |
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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

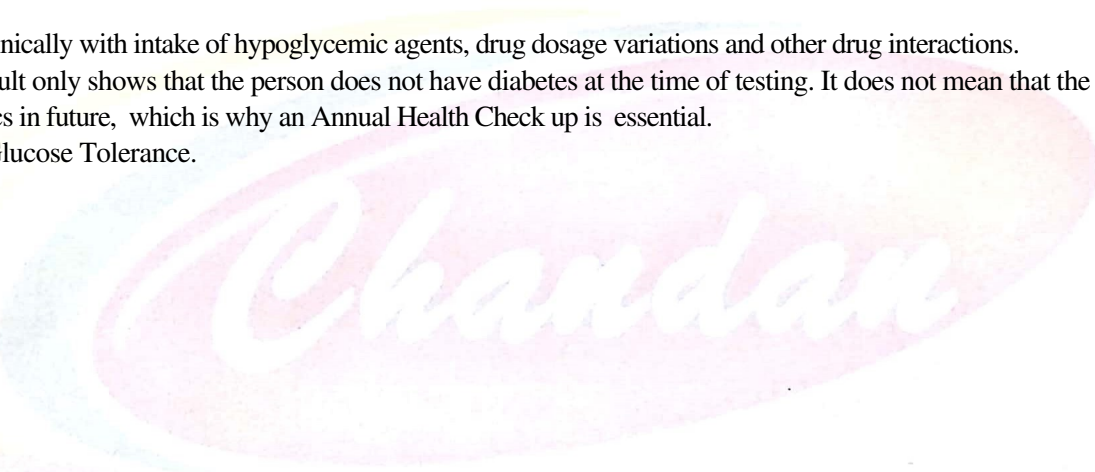
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|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

#### GLUCOSE FASTING , Plasma

|                 |       |       |  |         |
|-----------------|-------|-------|--|---------|
| Glucose Fasting | 90.90 | mg/dl | < 100 Normal<br>100-125 Pre-diabetes<br>≥ 126 Diabetes | GOD POD |
|-----------------|-------|-------|--|---------|

#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.



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| Age/Gender   | : 25 Y 0 M 0 D /F                          | Collected     | : 09/Jan/2023 09:40:49 |
| UHID/MR NO   | : CVAR.0000034695                          | Received      | : 09/Jan/2023 09:41:09 |
| Visit ID     | : CVAR0075512223                           | Reported      | : 09/Jan/2023 09:43:44 |
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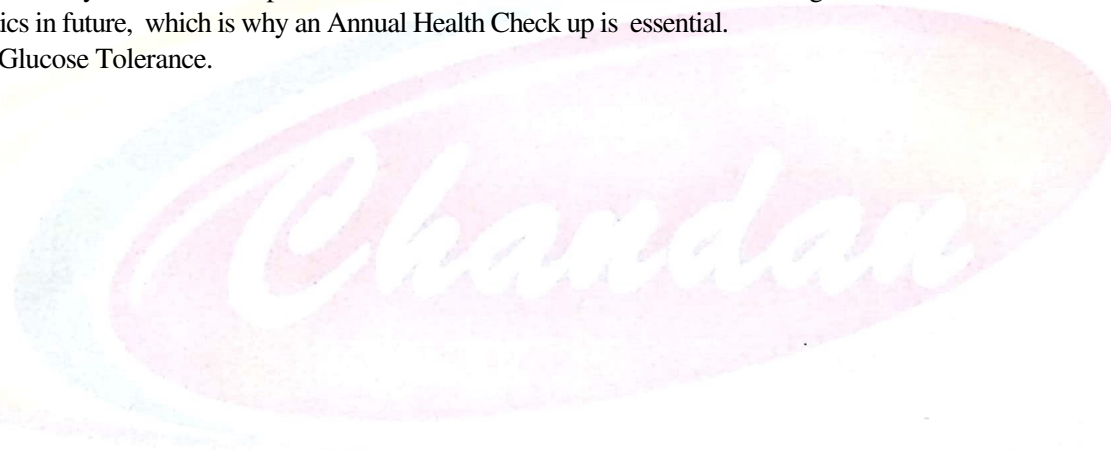
## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name                                      | Result | Unit  | Bio. Ref. Interval                                   | Method  |
|--|--------|-------|--|---------|
| Glucose PP<br><i>Sample: Plasma After Meal</i> | 120.00 | mg/dl | <140 Normal<br>140-199 Pre-diabetes<br>>200 Diabetes | GOD POD |

#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.



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| Age/Gender   | : 25 Y 0 M 0 D /F                          | Collected     | : 08/Jan/2023 14:25:05 |
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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \* , EDTA BLOOD

|                                  |       |               |  |             |
|----------------------------------|-------|---------------|--|-------------|
| Glycosylated Haemoglobin (HbA1c) | 5.00  | % NGSP        |  | HPLC (NGSP) |
| Glycosylated Haemoglobin (HbA1c) | 31.00 | mmol/mol/IFCC |  |             |
| Estimated Average Glucose (eAG)  | 96    | mg/dl         |  |             |

#### Interpretation:

##### NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

| Haemoglobin A1C (%)NGSP | mmol/mol / IFCC Unit | eAG (mg/dl) | Degree of Glucose Control Unit |
|-------------------------|----------------------|-------------|--------------------------------|
| > 8                     | >63.9                | >183        | Action Suggested*              |
| 7-8                     | 53.0 -63.9           | 154-183     | Fair Control                   |
| < 7                     | <63.9                | <154        | Goal**                         |
| 6-7                     | 42.1 -63.9           | 126-154     | Near-normal glycemia           |
| < 6%                    | <42.1                | <126        | Non-diabetic level             |

\*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

\*\*Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

#### Clinical Implications:

\*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

\*With optimal control, the HbA 1c moves toward normal levels.

\*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

c. Alcohol toxicity d. Lead toxicity

\*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

\*Pregnancy d. chronic renal failure. Interfering Factors:

\*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

|   |        |       |   |                   |
|---|--------|-------|---|-------------------|
| BUN (Blood Urea Nitrogen)<br>Sample:Serum | 8.50   | mg/dL | 7.0-23.0  | CALCULATED        |
| Creatinine<br>Sample:Serum                | 0.80   | mg/dl | Serum 0.7-1.3<br>Spot Urine-Male- 20-275<br>Female-20-320 | MODIFIED JAFFES   |
| Uric Acid<br>Sample:Serum                 | 6.60   | mg/dl | 2.5-6.0   | URICASE           |
| <b>LFT (WITH GAMMA GT) * , Serum</b>      |        |       |   |                   |
| SGOT / Aspartate Aminotransferase (AST)   | 27.50  | U/L   | < 35  | IFCC WITHOUT P5P  |
| SGPT / Alanine Aminotransferase (ALT)     | 30.70  | U/L   | < 40  | IFCC WITHOUT P5P  |
| Gamma GT (GGT)                            | 13.60  | IU/L  | 11-50   | OPTIMIZED SZAZING |
| Protein                                   | 6.80   | gm/dl | 6.2-8.0   | BIRUET            |
| Albumin                                   | 4.50   | gm/dl | 3.8-5.4   | B.C.G.            |
| Globulin                                  | 2.30   | gm/dl | 1.8-3.6   | CALCULATED        |
| A:G Ratio                                 | 1.96   |       | 1.1-2.0   | CALCULATED        |
| Alkaline Phosphatase (Total)              | 160.90 | U/L   | 42.0-165.0  | IFCC METHOD       |
| Bilirubin (Total)                         | 0.30   | mg/dl | 0.3-1.2   | JENDRASSIK & GROF |
| Bilirubin (Direct)                        | 0.10   | mg/dl | < 0.30  | JENDRASSIK & GROF |
| Bilirubin (Indirect)                      | 0.20   | mg/dl | < 0.8   | JENDRASSIK & GROF |

### LIPID PROFILE ( MINI ) , Serum

|                                    |        |       |   |                  |
|------------------------------------|--------|-------|---|------------------|
| Cholesterol (Total)                | 165.00 | mg/dl | <200 Desirable<br>200-239 Borderline High<br>> 240 High   | CHOD-PAP         |
| HDL Cholesterol (Good Cholesterol) | 48.10  | mg/dl | 30-70   | DIRECT ENZYMATIC |
| LDL Cholesterol (Bad Cholesterol)  | 52     | mg/dl | < 100 Optimal<br>100-129 Nr.<br>Optimal/Above Optimal<br>130-159 Borderline High<br>160-189 High<br>> 190 Very High | CALCULATED       |





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name     | Result | Unit  | Bio. Ref. Interval  | Method     |
|---------------|--------|-------|---|------------|
| VLDL          | 64.64  | mg/dl | 10-33   | CALCULATED |
| Triglycerides | 323.20 | mg/dl | < 150 Normal<br>150-199 Borderline High<br>200-499 High<br>>500 Very High | GPO-PAP    |



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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

#### URINE EXAMINATION, ROUTINE\* , Urine

|                             |                |       |  |                         |
|-----------------------------|----------------|-------|--|-------------------------|
| Color                       | LIGHT YELLOW   |       |  |                         |
| Specific Gravity            | 1.015          |       |  |                         |
| Reaction PH                 | Acidic ( 6.5 ) |       |  | DIPSTICK                |
| Protein                     | ABSENT         | mg %  | < 10 Absent<br>10-40 (+)<br>40-200 (++)<br>200-500 (+++)<br>> 500 (++++) | DIPSTICK                |
| Sugar                       | ABSENT         | gms%  | < 0.5 (+)<br>0.5-1.0 (++)<br>1-2 (+++)<br>> 2 (++++)                     | DIPSTICK                |
| Ketone                      | ABSENT         | mg/dl | 0.2-2.81   | BIOCHEMISTRY            |
| Bile Salts                  | ABSENT         |       |  |                         |
| Bile Pigments               | ABSENT         |       |  |                         |
| Urobilinogen(1:20 dilution) | ABSENT         |       |  |                         |
| Microscopic Examination:    |                |       |  |                         |
| Epithelial cells            | 2-3/h.p.f      |       |  | MICROSCOPIC EXAMINATION |
| Pus cells                   | 0-1/h.p.f      |       |  |                         |
| RBCs                        | ABSENT         |       |  | MICROSCOPIC EXAMINATION |
| Cast                        | ABSENT         |       |  |                         |
| Crystals                    | ABSENT         |       |  | MICROSCOPIC EXAMINATION |
| Others                      | ABSENT         |       |  |                         |

#### SUGAR, FASTING STAGE\* , Urine

|                      |        |      |
|----------------------|--------|------|
| Sugar, Fasting stage | ABSENT | gms% |
|----------------------|--------|------|

#### Interpretation:

- (+) < 0.5
- (++) 0.5-1.0
- (+++) 1-2
- (++++) > 2

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|-----------|--------|------|--------------------|--------|

#### SUGAR, PP STAGE\* , Urine

|                 |        |
|-----------------|--------|
| Sugar, PP Stage | ABSENT |
|-----------------|--------|

#### Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



S.N. Sinha

Dr.S.N. Sinha (MD Path)





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-3500227  
CIN : U85110DL2003PLC308206



|              |   |               |                        |
|--------------|---|---------------|------------------------|
| Patient Name | : Mrs. PRITI CHAUBEY-PKG10000239            | Registered On | : 08/Jan/2023 13:46:31 |
| Age/Gender   | : 25 Y 0 M 0 D /F                           | Collected     | : 08/Jan/2023 14:25:05 |
| UHID/MR NO   | : CVAR.0000034695                           | Received      | : 08/Jan/2023 15:41:56 |
| Visit ID     | : CVAR0075512223                            | Reported      | : 08/Jan/2023 15:44:05 |
| Ref Doctor   | : Dr. Mediwheel - Arcofemi Health Care Ltd. | Status        | : Final Report         |

## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

#### THYROID PROFILE - TOTAL \* , Serum

|                                   |       |        |             |      |
|-----------------------------------|-------|--------|-------------|------|
| T3, Total (tri-iodothyronine)     | 98.00 | ng/dl  | 84.61-201.7 | CLIA |
| T4, Total (Thyroxine)             | 5.63  | ug/dl  | 3.2-12.6    | CLIA |
| TSH (Thyroid Stimulating Hormone) | 4.02  | μIU/mL | 0.27 - 5.5  | CLIA |

#### Interpretation:

|          |        |                        |
|----------|--------|------------------------|
| 0.3-4.5  | μIU/mL | First Trimester        |
| 0.5-4.6  | μIU/mL | Second Trimester       |
| 0.8-5.2  | μIU/mL | Third Trimester        |
| 0.5-8.9  | μIU/mL | Adults 55-87 Years     |
| 0.7-27   | μIU/mL | Premature 28-36 Week   |
| 2.3-13.2 | μIU/mL | Cord Blood > 37Week    |
| 0.7-64   | μIU/mL | Child(21 wk - 20 Yrs.) |
| 1-39     | μIU/mL | Child 0-4 Days         |
| 1.7-9.1  | μIU/mL | Child 2-20 Week        |

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

S.N. Sinha

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Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-3500227  
CIN : U85110DL2003PLC308206



|              |  |               |                        |
|--------------|--|---------------|------------------------|
| Patient Name | : Mrs.PRITI CHAUBEY-PKG10000239            | Registered On | : 08/Jan/2023 13:46:32 |
| Age/Gender   | : 25 Y 0 M 0 D /F                          | Collected     | : N/A                  |
| UHID/MR NO   | : CVAR.0000034695                          | Received      | : N/A                  |
| Visit ID     | : CVAR0075512223                           | Reported      | : 09/Jan/2023 11:37:24 |
| Ref Doctor   | : Dr.Mediwheel - Arcofemi Health Care Ltd. | Status        | : Final Report         |

## DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA \*

### X-Ray Digital Chest P.A. View

- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

### IMPRESSION

**\* NO OBVIOUS DETECTABLE ABNORMALITY SEEN**

\*\*\* End Of Report \*\*\*

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)



*Roy*

Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*  
365 Days Open \*Facilities Available at Select Location

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Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection  
1800-419-0002

Mar. 2018



D63/6B-99, Shivaji Nagar Colony,  
Mahmoorganj, Varanasi, Uttar Pradesh 221010,  
India

Latitude

25.305447°

Longitude

82.979011°

LOCAL 14:19:31

GMT 08:49:31

SUNDAY 01.08.2023

ALTITUDE 19 METER